

Our Future Under the Affordable Care Act (ACA) – February 2013 Update



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ACA Provisions Affecting DHS



- **Patient choice**
 - Newly insured Medicaid patients will have greater choice of where to seek care
- **Reimbursement based on capitation/
bundled payments**
 - Move towards managed care
 - Per member per month rate *instead of* payment based on expenses

Hospital Focused, Episodic Care System (I)



- **Primary care is not emphasized**
 - No single provider is the “quarterback for care”
- **Care is often uncoordinated**
 - Care provided in clinic & in hospital is not in sync

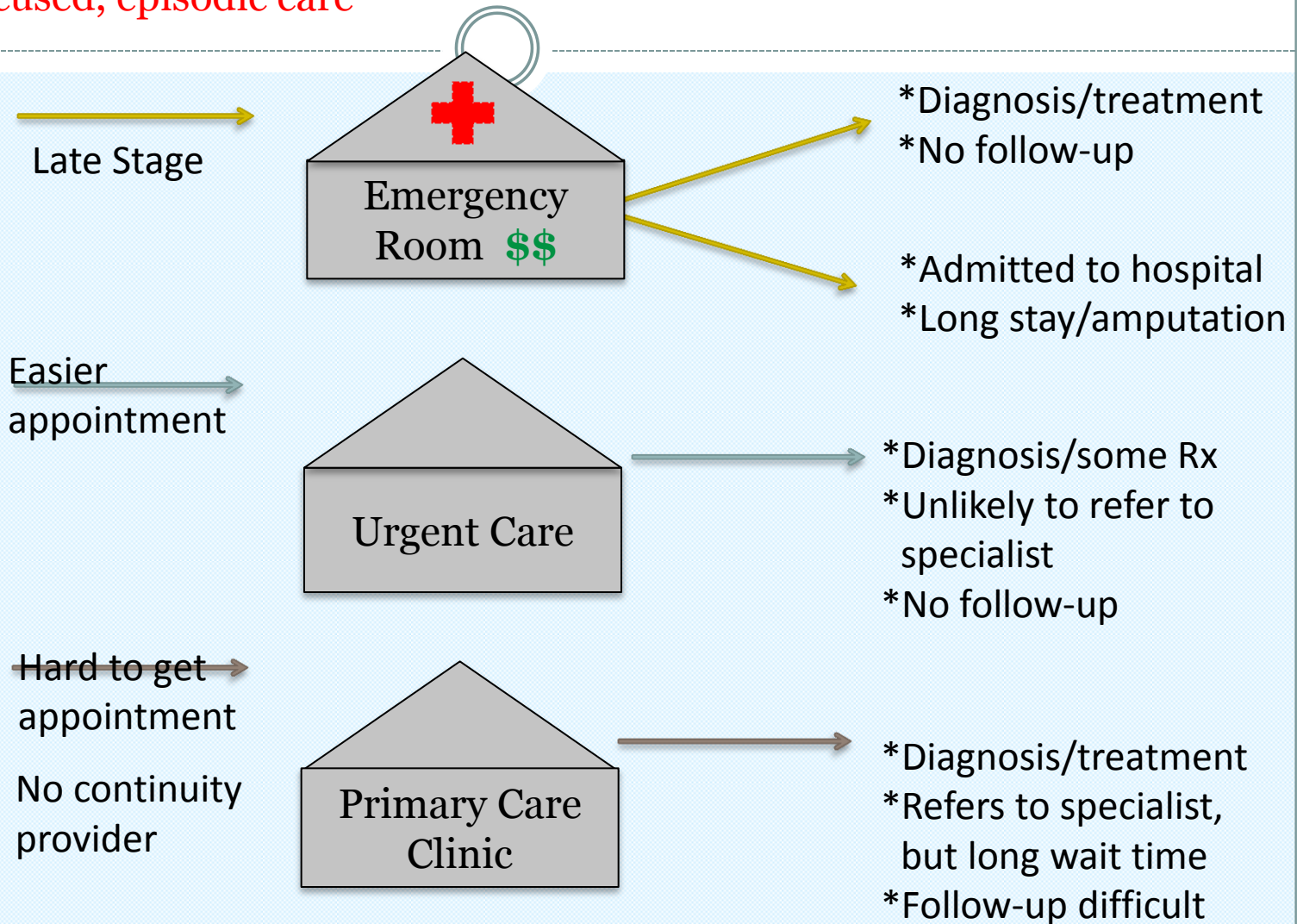
Hospital Focused, Episodic Care System (II)



- **Diseases are often treated at a late stage**
 - First care for a problem is often in urgent care or in the ER
- **Unsustainable under the ACA**
 - Poor outcomes for patients & high costs to the system

Diabetic Patient with a Foot Problem

Hospital-focused, episodic care



Integrated Care Delivery System (I)



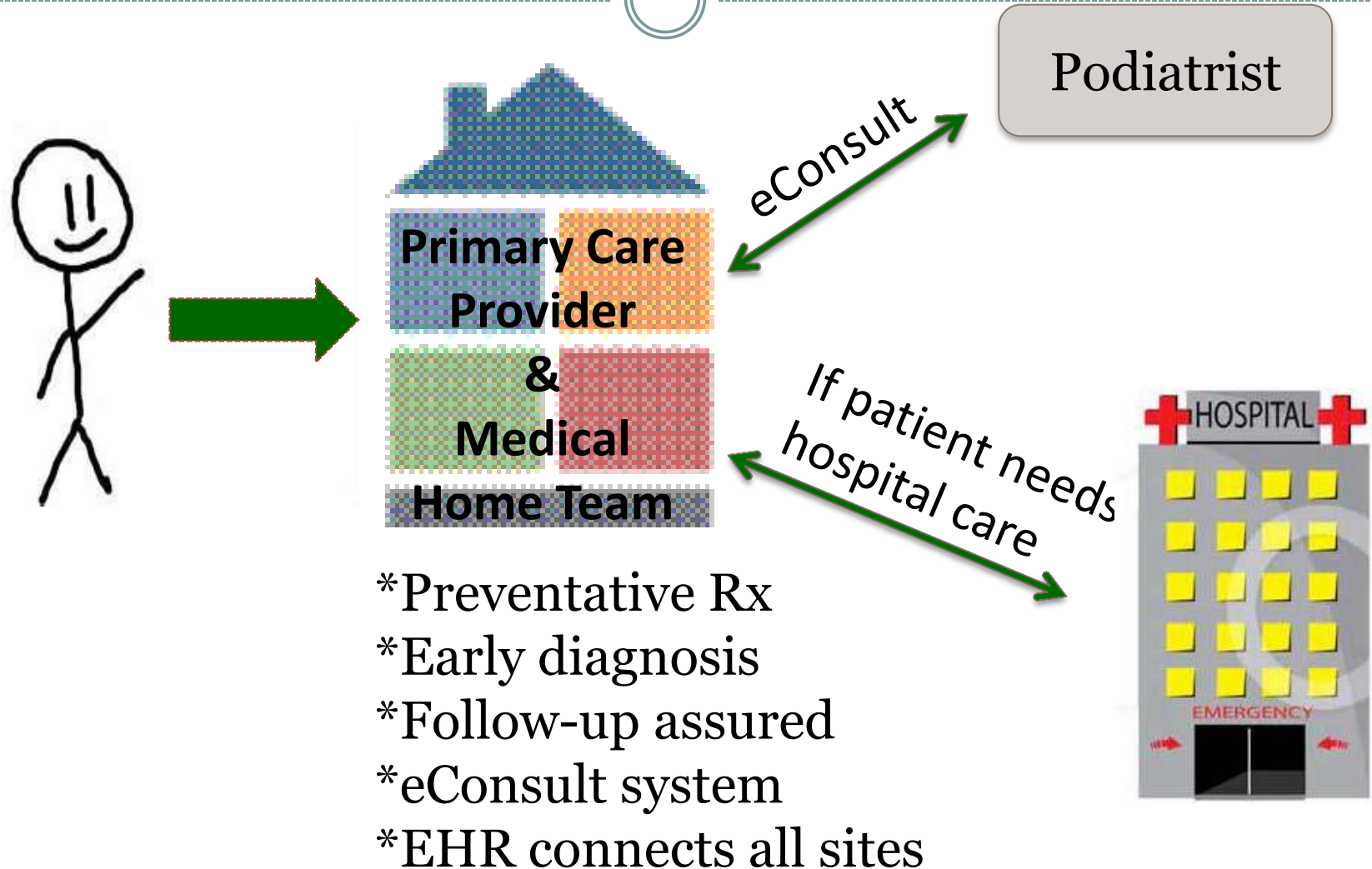
- **Primary care at the center**
 - Focus on prevention, early intervention, longitudinal care
 - Appropriate referrals by PCP to specialized services
- **Outpatient and inpatient care is coordinated**
 - Safe and effective handoffs between providers

Integrated Care Delivery System (II)



- Patients receive the ***right care***, in the ***right setting***, by the ***right provider***, with the ***right kind of teamwork***

Integrated Care for Diabetic with Foot Problem

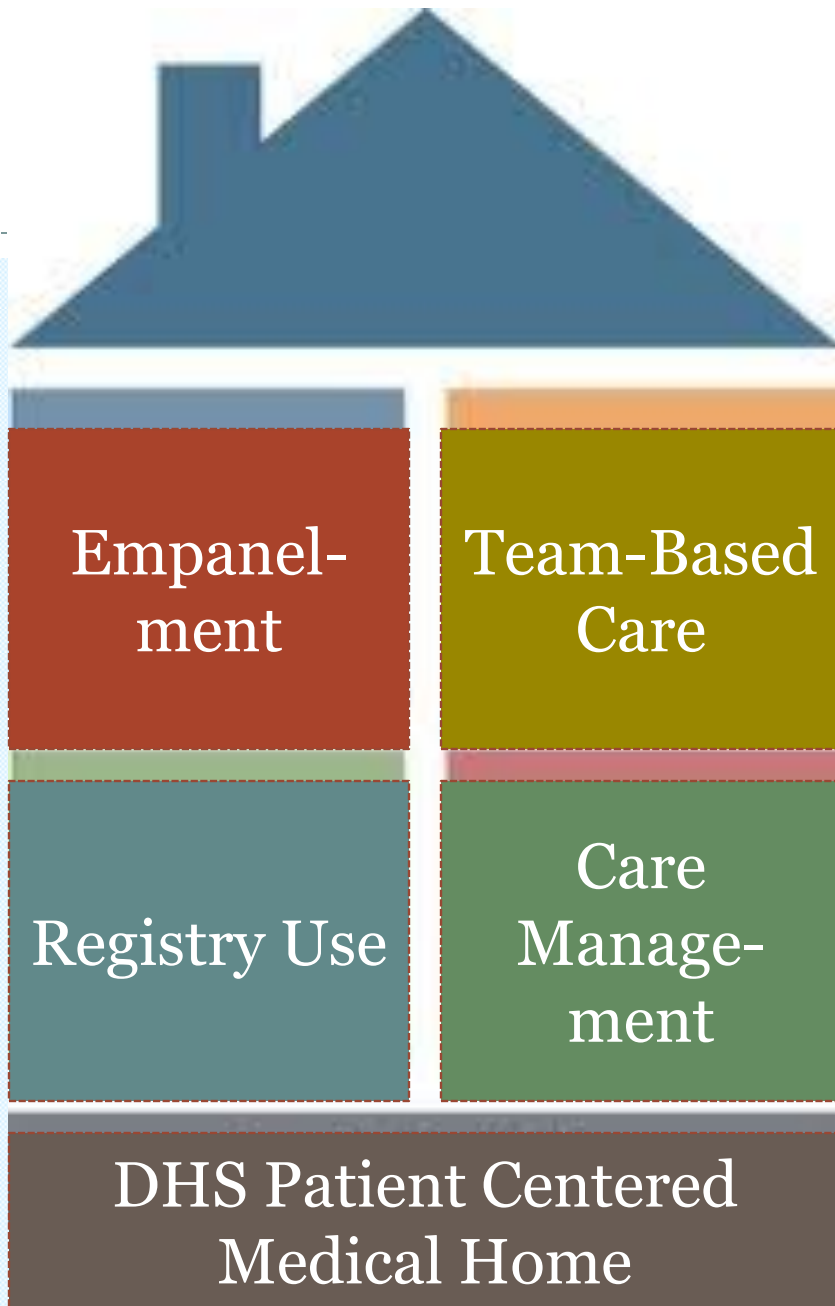




What Is A Medical Home?



- A “personal” physician/NP provides continuity of care
- A team-based model of care that coordinates care under one umbrella – or home
- **GOAL:** All primary care clinics within DHS will become patient-centered medical homes



- Improve coordination of care
- Improve timeliness of care
- Provide appropriate care

Improving Patient Scheduling



- **Patient-Centered Scheduling (PCS)**
 - Goal is to increase patient access to primary care
 - 6-month training collaborative focused on improving scheduling process
 - 25 to 50% reductions in no-show rates
 - 10 to 15% reductions in time to next available appointment
 - Created slots for same-day appointments

New Telephone System for Patients



- **Pilot telephony initiative at Long Beach CHC and MLK MACC**
- **Good pilot results**
 - reduced call wait times to less than 5 minutes
 - ability to return calls
 - language concordant staff based on patient preference
- **Plan to expand to all ACN sites**

eConsult Improves Specialty Care Access (I)



- Web-based platform for clinical dialogue between PCPs and Specialists
- Enables co-management support to PCPs, so patients can receive specialty care in medical home

eConsult Improves Specialty Care Access (II)



- **When needed, a timely face-to-face visit with a specialist**
 - appropriate pre-visit evaluation– allowing the first specialty visit to be a definitive one

HOW

How Does It Work?



Progress in eConsult roll-out



- **68** PCP Clinics using eConsult
 - All DHS PCPs and 28 CP clinics
 - **400+** PCPs on the system
- **6** Specialties thus far; 2 more on March 1, 2013
- **68%** needed Face-to-Face visit and **32%** did not need to come into specialty clinic

Integrating DHS Hospital Care



- **System-wide Electronic Health Record**
- **Interqual Utilization Review and Management System**
 - State of CA endorsed system of determining in real-time whether admissions and patient stays are medically appropriate
- **Permanent supportive housing units**
 - 300 new housing units opening by summer 2013